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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)

BIZ-045CPCN

Application Number 10/683880-Conf. #7888

Filed October 9, 2003

For PIN1 AS A MARKER FOR ABNORMAL CELL GROWTH

Art Unit 1642

Examiner Not Yet Assigned

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | Fee | Small Entity Fee | |
|---|--------|------------------|-------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ |
| <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ 2,160.00 |

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080 . I have enclosed a duplicate copy of this sheet.

05/06/2005 HWOLDGE1 00000011 120080 10683880

Sale Ref: 00000087 DA# 120080 10683880

01 FC:1000 790.00 DA

02 FC:1051 130.00 DA

03 FC:1201 1600.00 DA

05/06/2005 HWOLDGE1 00000087 10683880

I am the ☐ applicant/inventor.

04 FC:1255 2160.00 DA

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 37,320☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

Signature

May 3, 2005

Date

Cynthia L. Kanik, Ph.D.

Typed or printed name

(617) 227-7400

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV608866778US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 3, 2005

Signature:

(Cynthia L. Kanik, Ph.D.)